

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Genes Involved in Neuropsychiatric Disorders

Attorney Docket Number:: 020885-000720US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One:: NIH MH54844 and MH60398

Secrecy Order in Parent Appl.:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: E.  
Family Name:: Bunney  
Name Suffix:: Jr.  
City of Residence:: Laguna Beach  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 737 Kendall Drive  
City of Mailing Address:: Laguna Beach  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 92651

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Edward  
Middle Name:: G.  
Family Name:: Jones  
Name Suffix::  
City of Residence:: Winters  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: P. O. Box 1259  
City of Mailing Address:: Winters  
State or Province of mailing address:: CA

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95694

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Margherita  
Middle Name::  
Family Name:: Molnar  
Name Suffix::  
City of Residence:: Davis  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 613 Rutgers Drive  
City of Mailing Address:: Davis  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95616

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-provisional of	60/451,306	02/27/03
This Application	Non-provisional of	60/406,879	08/28/02

### **Foreign Priority Information**

Country::                      Application number::                      Filing Date::

### **Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::